

3627
#9
BT
+
11-6-02

PTO/SB/21 (modified)
Approved for use through xx/xx/xx, OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		Application Number	09/898,497
		Filing Date	July 5, 2001
		First Named Inventor	Hirohisa A. Tanaka <i>et al.</i>
		Group Art Unit Number	3627
		Examiner Name	James S. McClellan
Total Number of Pages in This Submission	6*	Attorney Docket Number	20662-07121

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) []
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input checked="" type="checkbox"/> Copies of 7 IDS Cited References	<input type="checkbox"/> _____
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> _____
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/> _____
<input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/> _____
<input type="checkbox"/> Status Request	<input type="checkbox"/> _____
<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> _____

REMARKS: * references not included in page count

SIGNATURE OF ATTORNEY OR AGENT			
Signature:			
Attorney/Reg. No.:	Kirk A. Gottlieb, Reg. No. 42,596	Dated:	October 11, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Non-Fee Amendment, Commissioner for Patents, Washington, DC 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.			
Signature:			
Typed or Printed Name:	Kirk A. Gottlieb	Dated:	October 11, 2002
Express Mail Mailing Number (optional):			

RECEIVED
OCT 21 2002
GROUP 3600

**FENWICK & WEST LLP**

SAN FRANCISCO OFFICE | 275 BATTERY ST., SUITE 1500 | SAN FRANCISCO, CA 94111

TEL 415.875.2300 | FAX 415.281.1350 | WWW.FENWICK.COM

FACSIMILE TRANSMISSION**CONFIDENTIAL****DATE:** October 18, 2002**CLIENT-MATTER No.:** 20662-07121**To:**

NAME	FAX No.	PHONE No.
Examiner James S. McClellan Group Art Unit 3627 Commissioner for Patents	(703) 872-9326	(703) 305-0212

FROM: Kirk A. Gottlieb**PHONE:** (415) 875-2414

NUMBER OF PAGES WITH COVER PAGE: 7

ORIGINAL WILL NOT FOLLOW

MESSAGE:**Revocation and Substitute Power of Attorney & Certificate Under 3.73(b)****Applicants:** Hirohisa A. Tanaka *et al.***App. No.:** 09/898,497**Filing Date:** July 5, 2001**Title:** METHOD AND APPARATUS FOR LOCATION-SENSITIVE, SUBSIDIZED CELL PHONE
BILLING**Atty. Dkt. No.** 20662-07121**CAUTION - CONFIDENTIAL**

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

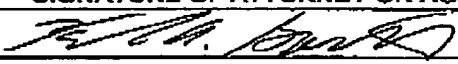
IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR,
PLEASE CALL PAT FLORIS AT (415) 875-2416 AS SOON AS POSSIBLE.


20662/07121/SF/5085682.1

PTO/SB/21 (modified)
 Approved for use through xx/xx/xx, OMB 0651-0031
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0001/PTO Rev. 10/95		U.S. Department of Commerce Patent and Trademark Office		Application Number	09/898,497
TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>				Filing Date	July 5, 2001
				First Named Inventor	Hirohisa A. Tanaka et al.
				Group Art Unit Number	3627
				Examiner Name	James S. McClellan
Total Number of Pages in This Submission		6	Attorney Docket Number		20662-07121

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO-1449 <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input checked="" type="checkbox"/> Revocation and Substitute Power of Attorney <input checked="" type="checkbox"/> Certificate Under 37 CFR § 3.73(b) <input checked="" type="checkbox"/> Copies of signed Assignments	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT			
Signature:			
Attorney/Reg. No.:	Kirk A. Gottlieb, Reg. No. 42,596	Dated:	October 18, 2002

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Examiner James S. McClellan, Group Art Unit 3627, Commissioner for Patents, at the Before Final facsimile number indicated below.			
Signature:			
Typed or Printed Name:	Kirk A. Gottlieb	Dated:	October 18, 2002
Facsimile Number:	1-703-872-9326		

Official

FAX RECEIVED

OCT 18 2002

GROUP 3600

20662/07121/SF/5085680.1

Received from < > at 10/18/02 1:55:21 PM [Eastern Daylight Time]